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## Attorney Docket Number **DECLARATION FOR UTILITY OR** MICHAEL P.C. WATT First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION Application Number (37 CFR 1.63) Filing Date Declaration ☐ Declaration Submitted after Initial OR Group Art Unit Submitted Filing (surcharge with Initial (37 ČFR 1.16 (e)) **Examiner Name** Filing required)

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As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  DUAL NETWORK WITH DISTRIBUTED FRENAL RIC								
NETWORK SECURITY								
(Title of the Invention)								
the specification of which								
P is attached hereto OR as United States Application Number or PCT International								
Was flort on AMAIDRIVVVV								
(if applicable).								
Application Number and was amended on (MM/DD/YYYY)								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or. PCT international filing date of the continuation-in-part application.								
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s)	nun sup		numbers supplem	Additional provisional application numbers are tisted on a supplemental priority data sheet PTO/SB/02B attached hereto.				
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[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

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Direct all correspondence to:	stomer Number Bar Code Label		OR 🗹 C	Correspondence address below			
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Address (185 LOS	TRANC	es in	card.				
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CHY PORTOLA VALL	EY	State	CA	ZIP 94028			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:							
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Given Name (first and middle [if any])			Family Name or Surname				
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Residence: City		State	Country	Citizenship			
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Additional inventors are being named	on the suppleme	ental Additional Inv	entor(s) sheet(s) PT	U/SB/UZA attached hereto.			